I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EU110400941US, in an envelope addressed to: Commissioner for Patents, Washington, DC 20231, on the date shown below.

Dated: June 24, 2002

Signature (Alice V. Maza)

Docket No.: HO-P02233US0

(PATENT)

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:

Thomas C. Gipson

Application No.: 09/484,260

Group Art Unit: 3672

Filed: January 18, 2000

Examiner: Suchfield, George A.

For: METHOD AND APPARATUS FOR

INJECTIONS COILED TUBING IN WELLS

RECEIVED

### TRANSMITTAL LETTER

AUG 1 9 2002

Commissioner for Patents Washington, DC 20231

**GROUP 3600** 

Dear Sir:

Enclosed are the following items for filing in connection with the above-referenced Patent Application:

- 1. Amendment (4 pages);
- 2. Amendment Transmittal (1 page);
- 3. Substitute Reissue Declaration by the Inventor (3 pages); and
- 4. Postcard

The Commissioner is hereby authorized to charge any deficiency in the fees filed, asserted to be filed or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Deposit Account No. 06-2375, under Order No. HO-P02233USO. A duplicate copy of this paper is enclosed.

Applicant believes no fee is due with this response. However, if a fee is due, please charge our Deposit Account No. 06-2375, under Order No. HO-P02233US0 from which the undersigned is authorized to draw.

Dated: June 21, 2002

Respectfully submitted,

Paul E. Krieger

Registration No.: 25,886

FULBRIGHT & JAWORSKI L.L.P.

1301 McKinney, Suite 5100 Houston, Texas 77010-3095

(713) 651-5151

Attorneys for Applicant

|    |   | Claims             | Highe      |  |  |  |
|----|---|--------------------|------------|--|--|--|
|    |   | Remaining          | Numb       |  |  |  |
|    | 1 1   | After              | Previou    |  |  |  |
|    |   | Amendment          | Paid       |  |  |  |
|    | Total Claims  | 11                 | - 20       |  |  |  |
|    | Independent<br>Claims   |                    | - 3        |  |  |  |
|    | Multiple Dependent Claims (check if app                                 |                    |            |  |  |  |
|    | Other fee (please specify):   |                    |            |  |  |  |
|    | TOTAL ADDITIONAL FEE FOR THIS   |                    |            |  |  |  |
|    | Large Entity  |                    |            |  |  |  |
|    | X No additional fee is required for this                                |                    |            |  |  |  |
|    | Please charge Deposit Account No. A duplicate copy of this sheet is enc |                    |            |  |  |  |
| JU | A check in the amount of \$   |                    |            |  |  |  |
|    | The Commissioner is hereby author as described below. A duplicate co    |                    |            |  |  |  |
|    | Creditany overpayment.  |                    |            |  |  |  |
|    | Charge a  | nv additional fili | ng or appl |  |  |  |

|  |   |   | · · · · · · · · · · · · · · · · · · · |  |                                       |  |  |  |
|--|---|---|---------------------------------------|--|---------------------------------------|--|--|--|
| AME  | NDMENT'                                   |   |                                       |  | Docket No.<br>HO-P02233US0            |  |  |  |
| Application No.<br>09/484,260  |   | Filing Date<br>January 18, 2000         |                                       | Examiner<br>Not Yet Assign                 | Art Unit<br>ed N/A                    |  |  |  |
| Applicant(s): Tho  | mas C. Gipsor                             | 1                                       |                                       |  |                                       |  |  |  |
|  | E, RE-EXAMIN<br>NJECTIONSCO               |   |                                       | TION FOR METHO                             | D AND APPARATUS                       |  |  |  |
|  |   | THE COMMI                               |                                       | •  |                                       |  |  |  |
| Transmitted here<br>The fee has been   |   |   |                                       |  |                                       |  |  |  |
|  |   | CLAIM                                   | IS AS AMENI                           | DED  | · · · · · · · · · · · · · · · · · · · |  |  |  |
|  | Claims<br>Remaining<br>After<br>Amendment | Highest<br>Number<br>Previously<br>Paid | Number<br>Extra Claims<br>Present     | Rate.                                      |                                       |  |  |  |
| Total Claims   | 11  | - 20 =                                  |                                       | х  | 0.00                                  |  |  |  |
| Independent<br>Claims  |   | - 3 =                                   |                                       | ×  |                                       |  |  |  |
| Multiple Dependent Claims (check if applicable)  |   |   |                                       |  |                                       |  |  |  |
| Other fee (please specify):  |   |   |                                       |  |                                       |  |  |  |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:   |   |   |                                       |  |                                       |  |  |  |
| Large Entity Small Entity  |   |   |                                       |  |                                       |  |  |  |
| X No additional fee is required for this amendment.  Please charge Deposit Account No in the amount of \$  A duplicate copy of this sheet is enclosed. |   |   |                                       |  |                                       |  |  |  |
|  |   |   |                                       | the filing fee is enclose                  | sed                                   |  |  |  |
| X The Commis   |   | by authorized to                        | o charge and                          | credit Deposit Accou                       |                                       |  |  |  |
| ☐ Credit-ar  | ny overpaymen                             | ıt.                                     |                                       |  |                                       |  |  |  |
| Charge a   | iny additional filir                      | ng or applicatior                       | n processing fe                       | ees required under 37                      | CFR 1.16 and 1.17.                    |  |  |  |
| Paul E. Krieger  | 5   | <u> </u>                                |                                       | Dated:                                     | June 21, 2002                         |  |  |  |
| Attorney Reg. N  | lo.: 25,886                               |   |                                       |  |                                       |  |  |  |
| FULBRIGHT & .<br>1301 McKinney,<br>Houston, Texas<br>(713) 651-5167  | , Suite 5100<br>77010-3095                | P.                                      |                                       |  |                                       |  |  |  |
| •  | •   |   |                                       |  |                                       |  |  |  |
|  |   |   |                                       |  |                                       |  |  |  |
|  |   | Amena                                   | dment Transmitta                      |  |                                       |  |  |  |
| nereby certify that this   | correspondence is                         | being deposited wi                      | ith the U.S. Posta                    | aı<br>ıl Service as Express Mail, <i>i</i> | Airbill No. EU110400941US             |  |  |  |

an envelope addressed to: Commissioner for Patents, Washington, DC 20231, on the date shown below.

Dated: June 24 2002

Signature: (Alice V. Maza)

Application No.: 09/484,260

# RECEIVED

AUG 1 9 2002

## **CERTIFICATE OF SERVICE**

**GROUP 3600** 

I do hereby certify that a copy of the Amendment, in a manner provided in 37 CFR 1.248, is being deposited with the United States Postal Service on August 19, 2002, addressed

> Cynthia G. Seal 2925 Briarpark, Suite 930 Houston, Texas 77042

> > Edward D. Steakley

DC 20231, on the date shown below.

Dated: August 19, 2002 Sig

Signature:

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EU110401045US, in an envelope addressed to: Box Reexamination, Commissioner for Patents, Washington,

(Elena M. Maglitto)

Docket No.: HO-P02233US0

(PATENT)

#### IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:

Thomas C. Gipson

Filed: January 18, 2000

Reissue Application No.: 09/484,260

Group Art Unit: 3672

Reexamination Control No. 90/005,708

Examiner: Suchfield, George A.

For: METHOD AND APPARATUS FOR

INJECTIONS COILED TUBING IN WELLS

TRANSMITTAL LETTER

RECEIVED

AUG 1 9 2002

**Box Reexamination** 

Assistant Commissioner for Patents Washington, DC 20231

**GROUP 3600** 

Dear Sir:

ولخط

Enclosed are the following items for filing in connection with the above-referenced Patent Application:

- 1. Response to Office Action (6 pages) and Declaration for filing in reexamination file with Certificate of Service (in duplicate); and
- 2. Previously filed Transmittal Letter, Amendment and Declaration with Certificate of Service for filing in reissue file (in duplicate); and
- 3. Return postcard.

Applicant believes no fee is due with this response. However, if a fee is due, please charge our Deposit Account No. 06-2375, under Order No. HO-P02233US0 from which the undersigned is authorized to draw. A duplicate copy of this paper is enclosed.

Dated:

August 19, 2002

Respectfully submitted

Edward D. Steakley

Registration No.: 47,964

FULBRIGHT & JAWORSKI L.L.P.

1301 McKinney, Suite 5100 Houston, Texas 77010-3095

(713) 651-5151

Attorneys for Applicant